

# FEE TRANSMITTAL

## For FY 2005

*Complete if Known*

Application Number	10/719,673
Filing Date	November 21, 2003
First Named Inventor	Khosro Khakzadi
Examiner Name	WIENER, Eric A.
Art Unit	2179
Attorney Docket Number	03-1862 / L13.12-0251

☐ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$540.00)

### METHOD OF PAYMENT (Check all that apply)

☐ Check    ☐ Credit Card    ☐ Money Order    ☐ None    ☐ Other (Please Identify): \_\_\_\_\_

☒ Deposit Account - Deposit Account Number: 12-2252    Deposit Account Name: LSI Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below    ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayment of fee(s)    ☒ Credit any overpayments  
under 37 CFR 1.16 and 1.17

**Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity		Small Entity		Small Entity		
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	210	105
Multiple dependent claims	360	180
<b>Multiple Dependent Claims</b>		
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>
20	- 20 or HP = 0	x 50 = 0
HP = highest number of total claims paid for, if greater than 20		
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>
3	- 3 or HP = 0	x 200 = 0
HP = highest number of independent claims paid for, if greater than 3		
		<u>Fee Paid (\$)</u>
		0

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
0	- 100 = 0	/ 50 = 0 (round up to a whole number) x	250	= 0

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Notice of Appeal, \$540.00 fee

**Fee(s) Paid (\$)**

**\$540.00**

#### SUBMITTED BY

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Name (Print/Type)	David D. Brush			Date: 3/11/09